

24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES
(Schedule E)

 PAGE 1 OF 4
 FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full) Planned Parenthood Votes		FEC IDENTIFICATION NUMBER ▼ C C00489799	
Check if <input type="checkbox"/> 24-hour report <input checked="" type="checkbox"/> 48-hour report		<input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on	

Full Name of Payee O'Brien Garrett (formerly known as OMP Inc.)		Date of Public Distribution/Dissemination MM / DD / YYYY 06 / 22 / 2016	
Mailing Address 1133 19th St. NW #300		Amount 2873.29	
City Washington	State DC	Zip Code 20036	Transaction ID : B617857
Purpose of Expenditure Printing of mail piece	Category/Type 001	Date of Disbursement or Obligation MM / DD / YYYY 06 / 22 / 2016	
Name of Federal Candidate Hillary Clinton		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> President District: _____ State: US	
Calendar Year-To-Date Per Election for Office Sought 25909.56		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____	

Full Name of Payee O'Brien Garrett (formerly known as OMP Inc.)		Date of Public Distribution/Dissemination MM / DD / YYYY 06 / 22 / 2016	
Mailing Address 1133 19th St. NW #300		Amount 1133.27	
City Washington	State DC	Zip Code 20036	Transaction ID : B617858
Purpose of Expenditure Postage for mail piece	Category/Type 001	Date of Disbursement or Obligation MM / DD / YYYY 06 / 22 / 2016	
Name of Federal Candidate Hillary Clinton		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> President District: _____ State: US	
Calendar Year-To-Date Per Election for Office Sought 25909.56		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____	

(a) SUBTOTAL of Itemized Independent Expenditures.....▶	4006.56
(b) SUBTOTAL of Unitemized Independent Expenditures.....▶	
(c) TOTAL Independent Expenditures.....▶	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Deirdre Schifeling

[Electronically Filed]

Date

MM / DD / YYYY
07 / 15 / 2016

Signature

24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES
(Schedule E)PAGE 2 OF 4
FOR SE OF FORM 24/48

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Check if <input type="checkbox"/> 24-hour report <input checked="" type="checkbox"/> 48-hour report		<input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on	

Full Name of Payee Planned Parenthood Action Fund Inc.		Date of Public Distribution/Dissemination MM / DD / YYYY 06 / 22 / 2016	
Mailing Address 123 William St, 10th Floor		Amount 38.45	
City New York	State NY	Zip Code 10038	Transaction ID : B619952
Purpose of Expenditure List rental	Category/ Type 003	Date of Disbursement or Obligation MM / DD / YYYY 06 / 22 / 2016	
Name of Federal Candidate Hillary Clinton		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> President District: _____ Senate: _____ State: US
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____	

Full Name of Payee Planned Parenthood Action Fund Inc.		Date of Public Distribution/Dissemination MM / DD / YYYY 06 / 22 / 2016	
Mailing Address 123 William St, 10th Floor		Amount 38.45	
City New York	State NY	Zip Code 10038	Transaction ID : B619955
Purpose of Expenditure List rental	Category/ Type 003	Date of Disbursement or Obligation MM / DD / YYYY 06 / 22 / 2016	
Name of Federal Candidate Donald Trump		<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> President District: _____ Senate: _____ State: US
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____	

(a) SUBTOTAL of Itemized Independent Expenditures.....▶	76.90
(b) SUBTOTAL of Unitemized Independent Expenditures.....▶	
(c) TOTAL Independent Expenditures.....▶	

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Full Name of Payee O'Brien Garrett (formerly known as OMP Inc.)		Date of Public Distribution/Dissemination MM / DD / YYYY 06 / 22 / 2016	
Mailing Address 1133 19th St. NW #300		Amount 1133.27	
City Washington	State DC	Zip Code 20036	Transaction ID : B617859
Purpose of Expenditure Postage for mail piece	Category/Type 001	Date of Disbursement or Obligation MM / DD / YYYY 06 / 22 / 2016	
Name of Federal Candidate Donald Trump		Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: US	
Calendar Year-To-Date Per Election for Office Sought 25909.56		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____	

Full Name of Payee O'Brien Garrett (formerly known as OMP Inc.)		Date of Public Distribution/Dissemination MM / DD / YYYY 06 / 22 / 2016	
Mailing Address 1133 19th St. NW #300		Amount 2873.29	
City Washington	State DC	Zip Code 20036	Transaction ID : B617860
Purpose of Expenditure Printing of mail piece	Category/Type 001	Date of Disbursement or Obligation MM / DD / YYYY 06 / 22 / 2016	
Name of Federal Candidate Donald Trump		Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: US	
Calendar Year-To-Date Per Election for Office Sought 25909.56		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____	

(a) SUBTOTAL of Itemized Independent Expenditures.....▶	4006.56
(b) SUBTOTAL of Unitemized Independent Expenditures▶	
(c) TOTAL Independent Expenditures.....▶	

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Check if <input type="checkbox"/> 24-hour report <input checked="" type="checkbox"/> 48-hour report		<input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on <table border="1" style="display:inline-table; margin:0 5px;">M M M</table> / <table border="1" style="display:inline-table; margin:0 5px;">D D D</table> / <table border="1" style="display:inline-table; margin:0 5px;">Y Y Y Y Y Y Y Y</table>	

Full Name of Payee Drew & Rogers, Inc.		Date of Public Distribution/Dissemination <table border="1" style="display:inline-table; margin:0 5px;">07</table> / <table border="1" style="display:inline-table; margin:0 5px;">14</table> / <table border="1" style="display:inline-table; margin:0 5px;">2016</table>	
Mailing Address 30 Plymouth Street		Amount <table border="1" style="display:inline-table; margin:0 5px;">7819.54</table>	
City Fairfield	State NJ	Zip Code 07004	Transaction ID : B619964
Purpose of Expenditure Printing & shipping of promotional items-Estimated cost		Category/Type 003	Date of Disbursement or Obligation <table border="1" style="display:inline-table; margin:0 5px;">07</table> / <table border="1" style="display:inline-table; margin:0 5px;">14</table> / <table border="1" style="display:inline-table; margin:0 5px;">2016</table>
Name of Federal Candidate Donald Trump		<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: US
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____	

Full Name of Payee SKDKnickerbocker		Date of Public Distribution/Dissemination <table border="1" style="display:inline-table; margin:0 5px;">07</table> / <table border="1" style="display:inline-table; margin:0 5px;">15</table> / <table border="1" style="display:inline-table; margin:0 5px;">2016</table>	
Mailing Address 1150 18th St., NW #800		Amount <table border="1" style="display:inline-table; margin:0 5px;">10000.00</table>	
City Washington	State DC	Zip Code 20036	Transaction ID : B619968
Purpose of Expenditure Online ad production-Estimated cost		Category/Type 003	Date of Disbursement or Obligation <table border="1" style="display:inline-table; margin:0 5px;">07</table> / <table border="1" style="display:inline-table; margin:0 5px;">15</table> / <table border="1" style="display:inline-table; margin:0 5px;">2016</table>
Name of Federal Candidate Trump / Pence		<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: US
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____	

(a) SUBTOTAL of Itemized Independent Expenditures.....▶	<table border="1" style="display:inline-table; margin:0 5px;">17819.54</table>
(b) SUBTOTAL of Unitemized Independent Expenditures▶	<table border="1" style="display:inline-table; margin:0 5px;"></table>
(c) TOTAL Independent Expenditures.....▶	<table border="1" style="display:inline-table; margin:0 5px;">25909.56</table>

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